



ForwardHealth Dental Provider Prior Authorization Training

Cindy Drury, EDS



Prior Authorization Overview

Methods of Submitting PA Requests:

- ForwardHealth secure Portal.
- Mail.
- Fax.



Prior Authorization via ForwardHealth Portal

Submission:

- 24 hours day, 7 days a week.
- Secure Portal.
- Initial submission.
- Limited up-front editing.
- Searching for previously submitted PA requests.
- When PA is submitted, a PA number is assigned.



Prior Authorization via ForwardHealth Portal (cont.)

Attachments:

- Portal will automatically supply the necessary documentation for the PA request.
- Providers should print a copy of the documentation for their records.
- Dental providers can upload supplemental information with their PA request.
- Supplemental information may be mailed.
- Print and complete the cover sheet summary.
- Fax or mail cover sheet summary and all supplemental information within 30 days of PA submission.



Prior Authorization via ForwardHealth Portal (cont.)

Returned Provider Review Letter:

- Letter attached to PA.
- Specifies the correction or additional information needed.
 - Supporting documentation will not be sent back to the provider.
- Corrections or additional information may be returned via the Portal.
- Response is required within 30 calendar days.
 - If no response, PA will be inactivated.
 - Provider must submit new PA.
 - Possibility of later grant date.
 - No notice of inactivated PA.



Prior Authorization via ForwardHealth Portal (cont.)

Amendment options:

- Via the secure Portal.
- Paper Prior Authorization Amendment Request by fax or mail.



Prior Authorization via ForwardHealth Portal (cont.)

Decision Notices:

- Copy of PA will no longer be returned to the provider.
- Providers will receive a decision notice to the address we have on the providers certification file.
- If PA was submitted via the Portal, the decision notice will be on the Portal.
- If PA was submitted via mail or fax and provider has Portal account, the decision notice will be sent to the provider's via the Portal.



PA Decision Notice

State of Wisconsin
Department of Health Services
Division of Health Care Access and Accountability
1000 Lincoln Drive, 10th Floor
Madison, WI 53706
Telephone: 608-261-8027
Fax: 608-261-8043
www.forwardhealth.wisconsin.gov

Jon Dehn
Governor
Kamie E. Foxworth
Secretary

July 10, 2018

MEMBER:
LAST NAME FIRST NAME
PA Number:
PA Name:

ADDRESS LINE 1
ADDRESS LINE 2
CITY, STATE, ZIP CODE
Member Name:
PA Request Type:
Provider Signature:
Letter Signature:

Dear LAST NAME FIRST NAME:

Your request for prior authorization (PA) has been finalized based on criteria established by the Department of Health and Family Services and is noted as YES, NO, or DENY. Refer to the authorization detail on the enclosed attachment for the service specific authorization.

An approved PA does not guarantee payment. Reimbursement is contingent upon enrollment of the member and provider at the time the service is provided and the completion of the claim information. Payment will not be made for services initiated prior to the approval or after the authorization expiration date. Reimbursement will be in accordance with ForwardHealth payment methodology and policy. If the member is enrolled in Budget Care Plan (Managed Care Program) at the time a prior authorization request is processed, ForwardHealth reimbursement will be allowed only if the service is not covered by the Managed Care Program.

If the PA request was denied or modified, a "Notice of Appeal Rights" letter has been sent to the member. Only the member, or authorized person acting on behalf of the member, may file an appeal with the Division of Hearing and Appeals. Providers are encouraged to remain in contact with the member during the appeal process. Providers may offer the member information necessary to file an appeal and help provide for a fair case during a fair hearing.

If you have any questions about the decision made on this PA, please contact Provider Services at (608) 947-9027.

Sincerely,
ForwardHealth
Enclosure
P-1107-10000

Wisconsin.gov



PA Decision Notice (cont.)

July 01, 2008, Page 2 of 2

Member Name: MEMBER NAME Member Identification Number: MEMBER ID	Billing Practice Location Provider Provider Name: Provider Address:
PA Number: PA Status:	Provider Identification Number: Provider Taxonomy: Provider ZIP Code:

Line #	Line Status	Rendering Provider	Taxonomy	Area of Oral Care	Tooth	Service	Modifier	POS	Unit Auth	Dollar Count	Auth Date	Expiry Date	Group ID
01	APPROVED			40	EN210			11	4.000	\$0.00	06/25/2008	07/15/2008	
CONJECTIVELY PLASTY PER TOOTH													



Prior Authorization via Paper

Submission:

- No longer a pre-printed form.
- Can be downloaded and printed from the ForwardHealth Portal.
- PA forms and attachments have been revised.
- PA number no longer pre-printed on form. PA number will be assigned when ForwardHealth receives the PA request.
- Providers are required to use the correct version of the form.
- If incorrect version used, PA will be returned.

A ForwardHealth Update will provide time frames for use of new PA forms and attachments.



Prior Authorization via Paper (cont.)

Attachments:

Mail supplemental information with the PA request.



Prior Authorization via Paper (cont.)

Returned Provider Review Letter:

- If provider has a Portal account, a Returned Review Review Letter will be sent to both on the Portal and sent via mail.
- Specifies the correction or additional information needed.
 - Supporting documentation will not be sent back to the provider.
- Corrections or additional information may be returned via the Portal or by mail.
- Response is required within 30 calendar days.
 - If no response, PA will be inactivated.
 - Provider must submit new PA.
 - Possibility of later grant date.
 - No notice of inactivated PA.



Prior Authorization via Paper (cont.)

Amendment options:

- Via the secure Portal.
- Paper Prior Authorization Amendment Request by fax or mail.



Prior Authorization via Paper (cont.)

Decision Notices:

- Copy of PA will no longer be returned to the provider.
- Providers will receive a decision notice to the address we have on the provider's certification file.
- If PA was submitted via mail and the provider has a ForwardHealth Portal account the decision notice will be sent to the providers via the Portal.
- If PA was submitted via mail and the provider does not have a ForwardHealth Portal account, the decision notice will be sent back to the provider via mail.



Prior Authorization via Fax

Same submission, attachment, Return Provider Review Letter, amendment, and Decision Notices guidelines that applied to paper PA apply to fax PA.

- Unreadable Fax
 - Provider will receive a miscellaneous return letter.



Prior Authorization Status

PA Status Codes

- Approved.
- Approved with modifications.
- Denied.
- Returned, provider review.
- Pending, ForwardHealth review.
- Suspend, provider sending information.
- PA inactive.



Other Prior Authorization Changes

Changes apply to both electronic and paper PA requests.

- NPI, assigned taxonomy code, and ZIP+4 must be included on PA requests (excluding non-health care providers).
- Keep copy of submitted documentation.
- ICD-9-CM diagnosis codes: use the greatest specificity.
- WCDP PA requests will be processed and adjudicated with BadgerCare Plus policy guidelines.



Resources

Providers of all programs will have many resources (both Web based and otherwise) to access information:

- ForwardHealth implementation Updates.
- WiCall.
- Provider Services.
- Walk-in appointments.
- Written inquires – can be submitted via mail or the Portal.
- Member Services.
- Professional Relations Representatives.
- Additional Provider Education.
- EDI Help Desk.
- Contact Us on the Portal.
- Portal Helpdesk.
- Important Web Sites.